STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

| I. Name of Lobbyist(s) Cody J | acobsen | <u> </u> | | | <u> </u> |
|---|-----------------------------|-------------------|----------------------|-----------------------------------|-------------------------------|
| II. Name of lobbyist's partnersh | ip, firm or c | corporation, if a | ny: | | |
| Civix Strategy Group, LLC | | | | | |
| (Name of partners | hip, firm or co | orporation) | | | |
| 114 North Main Street, STE 20 | 3 | Concord | | NH | 03301 |
| Business Address: (Street) | | (Town/City) | · | (State) | (Zip Code) |
| (507) 577 0561 | | | | allo Logi | |
| (603) <u>573-9661</u> (Telephone) | ' | (Fax | e-m: | all Cody@Ci | vixstrategygroup.com |
| III. This statement covers: (Chooreportable expense transactions All reportable transactions occ | which are n | ot attributable | to any one client | 1). | |
| Civix Strategy Group, LLC (Full Name | | | Obbyist Registration | | · |
| <u>OR</u> | | | | | |
| ☐ All reportable transactions by the unrelated to any particular client. | ne lobbyist (| including the lob | obyist's family), (| or the lobbying | g firm listed below which are |
| IV. Date of Report April 24, Reports cover: activity from date | | n to 3/31/19 | | , 2019 🛭 /1/19 to 6/30/19 | |
| October 3 activity from | 0, 2019 🛚 7/1/19 to 9/30 |)/19 | | 29, 2020 🗆 0/1/19 to 12/31/ | /19 |
| V. There have been no fees re If this box is checked, complete jus Concord, NH 03301. | | | | | |
| VI. Check if additional reports a | re attached | : | | | |
| ☐ If you have received fees or m | | | file Addendum A | - Fees and E | rpenses |
| ☐ If you have paid an honorariur Expense Reimbursement | n or reimbur | sed expenses, yo | ou must file Adde | endum B– Re | port of Honorariums or |
| ☐ If you, your firm, or your fami | ly has made | political contrib | utions, you must | file Addendu | m C- Political Contributions |
| Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my known (Signature of lobbyist) | SA 14-C and | | | ffirm that the f $\frac{23}{204}$ | |
| Torgrature or roodyist) | | | | (Dai | c) |
| Cody Jacobsen | | | | | |
| (Print Name of Johnvist) | | | | | |

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) Cody Jacobsen | | | |
|---|---|--|--|
| II. Name of lobbyist's partnership, firm or corporation, if any: | | | |
| Civix Strategy Group, LLC | | | |
| (Name of partnership, firm or corporation) | | | |
| III. Name of Client | Date | | |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations services oss fee amount reported shall not be | | |
| a) Total of all fees received in this reporting period | a) \$ <u>\$3500.00</u> | | |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | b) \$ <u>\$0.00</u> ear) | | |
| c) Total of all fees received to date (Add lines a and b) | c) \$ <u>\$3500.00</u> | | |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ <u>\$0.00</u> | | |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lesse being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political | | |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$`_ \$ 0.00 | | |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ \$0.00 | | |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ <u>\$0.00</u> | | |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ <u>\$0.00</u> |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ <u>\$0.00</u> |
| f) Total of all expenses year to date | f) \$ _\$0.00 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from J period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| , | \$ |
| | \$ |
| | 1 |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm | n that the foregoing informatio |
| is true and complete to the best of my knowledge and belief. | |
| Gm | 4/23/2014 |
| (Signature of lobbyist) | . (Date) |
| Cody Jacobsen | |
| (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist ~ RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

Cody Jacobsen

(Print Name of lobbyist)

Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Civix Strategy Group, LLC Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Date of Report (check one): April 24, 2019 ☑ July 31, 2019 □ October 30, 2019 □ January 29, 2020 □ I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): 1 Addendum A(s). Addendum B(s). ____ Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. 7/23/2019 (Signature of lobbyist)

APR 2 4 2019

NEW HAMPSHIRE DEPARTMENT OF STATE